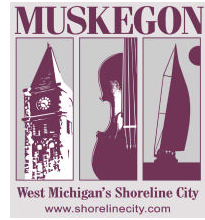


CITY OF MUSKEGON

Planning Department

933 Terrace St, P.O. Box 536

Muskegon, MI 49443-0536



APPLICATION FOR NON-OWNER OCCUPIED (RENTAL) DWELLING REGISTRATION - 2011

RENTAL PROPERTY ADDRESS *

NUMBER OF DWELLING UNITS *

Property Owners Name: *
(If Corporation or Joint Ownership, give name of principal officer or Resident Agent on reverse side)

Owners address: *

*

Telephone: * Cell phone: * Fax

Email Address: *

Drivers License Number: * State: * Date of Birth: *

* Indicates Required Fields

NOTE: Pursuant to Section 10-351(a) of the city's property maintenance code, "any owner who does not reside within thirty (30) miles of the city shall designate a responsible local agent who shall be legally responsible for operating such dwelling in compliance with the law, including this code".

Local Agents Name: *
(Responsible Party) (If Corporation or Joint Ownership, give name of principal officer or Resident Agent on reverse side)

Local Agents address:

Telephone: Cell phone: Fax:

Email Address:

Drivers License Number: State: Date of Birth:

Local Agent's Signature : Date:

I hereby certify that I am the owner, or land contract purchaser for the above rental or non-owner occupied property location. Application is hereby made for Rental Dwelling Registration. Chapter 10 of the Muskegon Code of Ordinances requires periodic inspection of rental properties and payment of all fees.

(See Fee Schedule on reverse side)

Signed Date:

NOTE: *Rental Dwelling* is defined by our ordinance as any dwelling unit which is not occupied by the owner.

PROPERTY OWNER INFORMATION (Corporate Information)

(If Corporation or Joint Ownership give name of principal officer or Resident Agent)

Property Owners Name: _____

Owners address: _____

Telephone: _____ Cell phone: _____ Fax: _____

Email Address: _____

Drivers License Number: _____ State: _____ Date of Birth: _____

LOCAL AGENT INFORMATION (Corporate Information)

(If Corporation or Joint Ownership give name of principal officer or Resident Agent)

Local Agents Name: _____

Local Agents address: _____

Telephone: _____ Cell phone: _____ Fax: _____

Email Address: _____

Drivers License Number: _____ State: _____ Date of Birth: _____

Registration Fees are calculated on each property:

Single Dwelling Unit (per structure)	\$ 35.00
Duplex (2 Dwelling units per structure)	\$ 40.00
Three Dwellings (per structure)	\$ 50.00
Over 3 Dwelling units (per structure or complex)	\$ 50.00 + \$5.00 addl. for each unit over 3

Registration fees payable to:

City of Muskegon * Planning Department *

P.O. Box 536 *

Muskegon, MI 49443-0536